

Vermont Mental Health Performance Indicator Project

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MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project
Advisory Group and Interested Parties

FROM: John Pandiani
Monica Simon

DATE: September 22, 2000

RE: Utilization of Mental Health Services by Recently Hospitalized Adults

People with a recent history of hospitalization for mental illness are among the special populations in need of mental health services that were identified by the Vermont Mental Health Performance Indicator Advisory Group. This week's PIP presents one measure of access to community mental health services for adult Vermont residents who had been treated for mental illness on an inpatient basis. This measure focuses on the proportion of all residents of each of Vermont's ten community mental health service areas who made use of adult mental health service programs (CRT and Adult Outpatient) at their local community mental health center during the year after the year in which they were hospitalized. Specifically, the analysis measures the rate at which people hospitalized during FY1998 made use of community mental health services during FY1999.

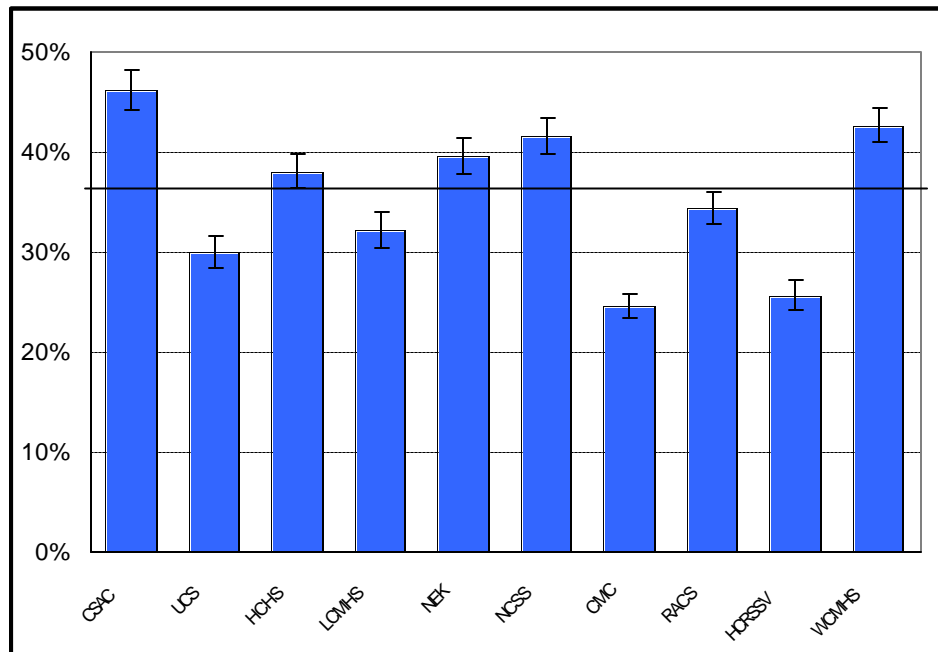
Information on Vermont residents who were hospitalized for mental health services during FY1998 was obtained from data sets from three sources. An extract from the Hospital Discharge Data Set maintained by the Vermont Department of Health provided information on all Vermont Residents hospitalized under a major diagnostic category of mental illness in general hospitals and veterans' hospitals in Vermont, New Hampshire, Massachusetts, and neighboring counties of New York State. A data set with basic information on Vermont residents hospitalized at the Brattleboro Retreat, the state's only private psychiatric hospital, was provided by that institution. A data set with basic information on Vermont residents hospitalized at the Vermont State Hospital was provided by that institution.

Information on individuals who were served by community mental health programs for adults in Vermont during FY1999 was obtained from the Quarterly Service Report data sets submitted by the local agencies to the Department of Developmental and Mental Health Services. Because these data sets do not share unique person identifiers, Probabilistic Population Estimation was used to measure the caseload overlap between the inpatient and the community programs.

During FY1999, community mental health programs for adults in Vermont provided services to more than one-third of adult residents of their service areas who had been hospitalized for mental illness during the previous year. There were, however, significant differences in the rate at which former inpatients made use of community mental health programs. Utilization rates varied from more than 45% in the Addison service area to about 25% in the Orange and Southeast service areas.

We will appreciate your thoughts on the value of this indicator of community mental health program performance and your suggestions for further analysis of these data. As always, you can reach us at 802-241-2638 or jpandiani@ddmhs.state.vt.us.

Adult Mental Health Service Utilization in FY1999 by People Hospitalized FY1998



Region/Provider	Total Residents Hospitalized 1998	1998 Hospitalized Residents who were MH Consumers in 1999	
		Number	Percent
Addison - CSAC	109 ± 0.5	51 ± 1.2	46% ± 2.0%
Bennington - UCS	126 ± 0.5	38 ± 1.0	30% ± 1.6%
Chittenden - HCHS	520 ± 5.0	198 ± 20.2	38% ± 1.7%
Lamoille - LCMHS	68 ± 0.3	22 ± 0.4	32% ± 1.8%
Northeast - NEK	213 ± 1.2	84 ± 3.5	40% ± 1.8%
Northwest - NCSS	122 ± 0.6	51 ± 1.2	42% ± 1.8%
Orange - CMC	97 ± 0.4	24 ± 0.3	25% ± 1.1%
Rutland - RACS	291 ± 1.8	100 ± 5.8	34% ± 1.7%
Southeast - HCRSSV	616 ± 6.5	158 ± 23.5	26% ± 1.6%
Washington - WCMHS	343 ± 2.6	146 ± 8.5	43% ± 1.7%
Total	2,505 ± 9	872 ± 16	
Mean			35%
Median			36%

Based on Probabilistic Population Estimation of overlap between all adults hospitalized in 1998 (from the Hospital Discharge Data Set maintained by the Vermont Health Department) and the active adult client caseload (from DDMHS MSR Data Base) in FY 1999.

Active adult caseload includes all people assigned to a CRT or Adult Outpatient program who received at least one community mental health service during FY 1999.